

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 6/66729 FILING DATE  
APPLICANT(S)

*6/16/05*

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
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50							
TOTAL IND.	1		1				
TOTAL DEP.	4		4				
TOTAL CLAIMS	5		5				
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